

HS-19.19, "OUTPATIENT ADDICTION TREATMENT - GENERAL PROVISIONS"
SCDC POLICY

NUMBER: HS-19.19

TITLE: OUTPATIENT ADDICTION TREATMENT - GENERAL PROVISIONS

ISSUE DATE: May 27, 2021

RESPONSIBLE AUTHORITY: DIVISION OF ADDICTION RECOVERY SERVICES

POLICY MANUAL: HEALTH SERVICES

RELEVANT SCDC FORMS/SUPPLIES: M-198, 19-11

SUPERSEDES: NONE - NEW POLICY

ACA/CAC STANDARDS: 4-ACRS-4C-06, 4-ACRS-5A-08, 4-ACRS-5A-12, 4-ACRS-7D-08, 4-4099, 4-4102, 4-4347, 4-4350, 4-4361, 4-4363-1, 4-4377, 4-4378, 4-4413, 4-4437, 4-4438, 4-4439, 4-4440, 4-4441

STATE/FEDERAL STATUTES: Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 C.F.R. Part 2

PURPOSE: To provide information and standards of the care regarding the management of inmates in need of outpatient (OP) treatment services within the South Carolina Department of Corrections (SCDC).

POLICY STATEMENT: SCDC is committed to providing all inmates access to addiction treatment care based on documented policies and procedures. Provisions of addiction treatment services include inmate assessment and evaluation, referrals for care, ongoing care, and discharge. Unless otherwise noted, policy information is applicable to male and female inmates.

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SPECIFIC PROCEDURES:

1. GOAL AND INTENT:

1.1 The goal is to diagnose and treat inmates with, and at risk for developing an addiction to substances, and to work with inmates in developing plans of care designed to minimize symptoms and reduce the adverse effects of substance use, maximize wellness and promote recovery.

1.2 Outpatient (OP) services will use trauma-informed, evidenced-based curriculum and practices to minimize symptoms, adverse effects, and/or consequences of substance use, as well as promote recovery and sobriety within SCDC and through integration into the community.

2. ELIGIBILITY CRITERIA:

2.1 Inmates who are considered for OP services must meet the following criteria:

- Have an identifiable issue with substance use.
- Have a minimum of four (4) months left in SCDC custody at the start of groups.
- Must be in a general population custody and/or reside in a dorm/program area that would not impede their ability to attend groups.
- Must be classified as MH-4, MH-5, or NMH (non-mental health). MH-3 will require an evaluation by a Qualified Mental Health Provider (QMHP) and will be considered on a case by case basis.

2.2 Referrals can be made by any staff, volunteer, family member, inmate, or other individual that has contact with an inmate in need of treatment. Staff will submit an email to the Division Director of Addiction Recovery Services designated treatment provider for the institution, or other designee, with the referred inmate's name, SCDC number, and summary of why the referral is being made. All other referrals can be made via a paper request on SCDC Form 19-11, Request to Staff Member, with inmate's name, SCDC

number, and why the referral is being made. It is recommended that the following information be included, in addition to the minimum requirements identified above:

- Substance use history;
- Current mental health condition and classification;
- Current and/or past prescribed treatments;
- Current mental health treatment plan; and
- Biopsychosocial assessment summary

2.3 Referrals can be sent to the designated treatment provider for the institution, the Division Director of Addiction Recovery Services or designee. The recommendations will be reviewed by the designated treatment provider for the institution. Disposition of referrals will be sent back to the referral source within thirty (30) days. Those screened as appropriate will be requested for transfer, if needed, through Central Classification. Priority placement in OP treatment will be given to those completing ATU.

2.4 It will be the responsibility of the Division Director of Addiction Recovery Services, or designee, to manage and monitor all inmates pending approval and admission.

3. SERVICES OFFERED:

3.1 Inmates identified as appropriate for OP services will collaborate with their counselor within thirty (30) days, and before beginning groups, to complete the following documentation:

- Complete a new or updated biopsychosocial assessment.
- Administer and update Texas Christian University Drug Dependency Screener (TCUDDS).
- Treatment plan.
- Orientation checklist.
- Staffed assessment, to include diagnosis and treatment plan.
- Update inmate program code and TCUDDS in the OMS.

3.2 Treatment plans will be reviewed and updated at least every six (6) months, or more often as clinically indicated.

3.3 The counselor will notify institutional contraband staff of group participants, prior to starting the first group, and request a urine drug screen be completed prior to anticipated graduation date.

3.4 Services provided will be primarily group counseling and psychoeducational in nature. Individual counseling will only be offered on a limited basis, depending on counselor availability, and may be referred to a QMHP as needed.

3.5 Group counseling will be structured as outlined below, unless approved by the Division Director of Addiction Recovery Services.

- Groups will provide forty (40) hours of counseling and psychoeducation per group cycle.
- Maximum occupancy will be fifteen (15) participants.
- Groups will be a closed format.

4. DISCHARGE/TERMINATION:

4.1 An inmate may be staffed for termination or discharge for any one or more of the following reasons:

- Noncompliance with group rules.
- Missing more than three (3) sessions per group cycle.
- Parole
- Successful completion
- Requiring a higher level of care and/or need for ATU services.
- Custody change to RHU that would impact ability to attend group.
- Refusal to comply with treatment requirements.
- Request from the inmate to terminate.
- 4.1.1 When an inmate appears appropriate for termination or discharge, the counselor will staff their recommendation with a treatment team and/or the Division Director of Addiction Recovery Services. If termination is warranted, the inmate will not be eligible to return for a minimum of three (3) months, unless approved by the Division Director of Addiction Recovery Services.

4.2 Discharge Process:

4.2.1 In all cases, when an inmate is being removed prior to graduation and will remain in SCDC custody, a referral for appropriate care will be made as applicable.

4.2.2 When an inmate is being released from SCDC custody, the counselor will communicate the inmates discharge needs for any continued substance use treatment to the QMHP and/or re-entry staff to complete the discharge plan.

4.3 Documentation Required for Discharge/Termination: The counselor is required to document all actions and contacts in the electronic health record within ten (10) working days of the discharge/termination. In cases where successful completion is noted and follow-up care is warranted, referrals are required and must be documented in the inmate's treatment record. Similarly, all discharges/terminations will be documented in the inmate's treatment record.

4.4 In all cases, the counselor is also responsible for updating all program codes within the OMS.

5. CLINICAL RECORDKEEPING:

5.1 The assigned counselor is required to document all encounters and necessary documentation in the offenders electronic health record (EHR).

5.2 At a minimum, the following documentation will be required to be in the offenders EHR:

- Assessments or updated assessments.
- Treatment plan.
- Treatment team staffing outcomes, to include participants.
- Each group session.
- Termination and discharge notes
- Referrals.

5.3 It will be the responsibility of each counselor to establish an appropriate and acceptable record keeping protocol for any hard copy documents. All recordkeeping protocols must be approved prior to implementation by the Division Director of Addiction Recovery Services.

5.4 Confidentiality: Staff members are required to be familiar with Federal Regulations regarding Confidentiality of Alcohol and Drug Abuse Patient [inmate] Records (42 CFR, Part 2) and comply with SCDC Quality Assurance Administrative and Fiscal Standards regarding record maintenance.

6. DEFINITIONS:

Biopsychosocial Assessment refers to a clinical assessment administered by a Division of Addiction Recovery Services employee which is used to ensure that the most appropriate treatment services are provided.

Counselor refers to an SCDC employee assigned to the Division of Addiction Recovery Services who is designated to provide substance use disorder and addiction treatment services to the inmate population.

Qualified Mental Health Provider (QMHP) refers to a Psychiatrist, Licensed Psychologist, Licensed Professional Counselor, Licensed Professional Counselor-Supervisor, Licensed Independent Social Worker, Licensed Marital Family Therapist, or Psychiatric Nurse Practitioner. QMHP also includes Licensed Master Social Worker, Licensed Marital Family Therapist-Intern, and Licensed Professional Counselor-Associate with appropriate supervision.

Texas Christian University Drug Dependency Screener (TCUDDS) refers to the screening instrument administered to inmates to identify substance dependency.

SIGNATURE ON FILE

—
s/Bryan P. Stirling, Director

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Date of Signature

ORIGINAL SIGNED COPY MAINTAINED IN THE OFFICE OF POLICY DEVELOPMENT